PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificat	ed below or directed oth	nerwise in Block 1, by (a	i) specifying a new corresp	pondence address; and	for (b) indicating a sepa	rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23338	7590 02/12	/2010		Certific	ate of Mailing or Transi	mission	
DENNISON, SCHULTZ & MACDONALD 1727 KING STREET SUITE 105				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
ALEXANDRIA	, VA 22314					(Depositor's name)	
					·	(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	АТ	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/597,259 09/05/2006		Peter Edward Burton		06097	8421		
TITLE OF INVENTION	: HARD WOOD STRA	ND PRODUCTS		,		·	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$1055	05/12/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	}			
O HERN, BRENT T		1794	428-114000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME A	AND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or type	pe)			
PLEASE NOTE: Un	less an assignee is ident th in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NC	data will appear on the p of a substitute for filing an	atent. If an assignee : assignment.	is identified below, the d	locument has been filed for	
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
LIGNOR LIMITED			Keppel Sands, Queensland, Australia				
Please check the approp	riate assignee category o	r categories (will not be p	rinted on the patent):	Individual 🛚 Corpo	oration or other private gr	oup entity Government	
4a. The following fee(s)	are submitted:	4	b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)				
☑ Issue Fee ☑ Publication Fee (No small entity discount permitted)			☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Sta	atus (from status indicate	ed above)					
a. Applicant clain	ns SMALL ENTITY stat	tus. See 37 CFR 1.27.			ENTITY status. See 37 C		
NOTE: The Issue Fee ar interest as shown by the			ed from anyone other than the office.	the applicant; a register	red attorney or agent; or t	he assignee or other party in	
Authorized Signature Let JSOS			Date 5/7/10				
Typed or printed name Ira J. Schultz			Registration No. 28666				
			ion is required to obtain or 1.14. This collection is es y depending upon the indihe Chief Information Offic COMPLETED FORMS Tespond to a collection of in			d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.	
origer the raperwork Re	caucaon Actor 1995, no	. porcono are required to r	,				